

**FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

APPLICANT

10/52873 Y

9.25.06 CLAIMS

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1	
2		1		1		1
3		2		1		1
4		2		1		1
5		1		1		1
6		2		1		1
7		0		1		1
8						
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49						
50						
TOTAL IND.		↓	1	↓	1	↓
TOTAL DEP.		←	6	←	6	←
TOTAL CLAIMS			7		7	

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						